

PRISONER CIVIL RIGHTS ACT COMPLAINT FORM  
42 U.S.C. §1983  
UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF NORTH CAROLINA

FILED  
STATESVILLE, NC

JUN 15 2018

U.S. District Court  
Western District of N.C.

RONALD MCCLARY

(Enter above full name of Plaintiff/only  
One plaintiff permitted per complaint.)

OFFICER BUTLER

Case No. 5:18cv98

(Enter above full name of defendant or defendants.)

I. PREVIOUS LAWSUITS

A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? Yes ( ) No (X)

B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit describe the additional lawsuits on an additional sheet of paper, using the same outline.

1. Parties to previous lawsuits:  
Plaintiffs:

\_\_\_\_\_  
\_\_\_\_\_

Defendants:

\_\_\_\_\_  
\_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the

county): \_\_\_\_\_

3. Docket number: \_\_\_\_\_

4. Name of presiding judge: \_\_\_\_\_

5. Disposition (for example, was the dismissed? Appealed? Is it still pending?)

\_\_\_\_\_

6. Approximate date of case filing: \_\_\_\_\_

II. PREVIOUS IN FORMA PAUPERIS LAWSUITS

- A. While incarcerated or detained in any facility, have you filed a lawsuit in any federal court in which you were allowed to proceed in forma pauperis (without prepayment of fees)?

Yes (X) No ( )

1. Name the court and docket number for each:

PROPERLY DESTROYED CANT REMEMBER  
NUMBERS

- B. Were any of these cases dismissed under 28 U.S.C. §1915(d) on the grounds that they were frivolous, malicious, or failed to state a claim upon which relief may be granted?

Yes (X) No ( )

1. If yes, how many?

2. Name the court and docket number for each action:

III. EXHAUSTION OF INMATE ADMINISTRATIVE REMEDIES

- A. Did you present the facts of each claim relating to your complaint to the Inmate Grievance Commission or any other available administrative remedy procedure?

Yes (X) No ( )

- B. If your answer is Yes:

1. When did you file your grievance?

MAY 14 2018

2. What was your grievance?

PREA

3. Did you appeal any adverse decision to the highest level possible in the administrative procedure? Yes (X) No ( )

If yes, when was the decision and what was the result?

- C. If your answer to A is no, identify the claim(s) and explain why not:

IV. PARTIES

A. Plaintiff's Name:

~~XXXXXXXXXXXXXXXXXXXX~~ ~~XXXXXXXXXXXXXXXXXXXX~~ RONALD MCCLARY  
Address/Place of Confinement: 633 OLD LANDFILL RD  
TAYLORSVILLE, N.C. 27681

B. Defendant(s)

Name of Defendant 1: OFFICER BUTLER  
Position: OFFICER  
Place of Employment: ALEXANDER CORR INST  
Current Address: 633 OLD LANDFILL RD TAYLORSVILLE, N.C.

Additional Defendant(s) provide name, position, place of employment, and current address for each.

Defendant 2: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Defendant 3: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Defendant 4: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Continue on separate sheet if necessary.)

V. STATEMENT OF CLAIM

State here as briefly as possible the FACTS in your case. Do this by describing how each defendant named in Section IV B. above is personally involved in depriving you of your rights. All relevant times, dates, and places should be included. YOU MAY, BUT NEED NOT, GIVE LEGAL ARGUMENTS OR CITE ANY CASES OR STATUTES. You may only combine claims involving events that relate to all defendants. Number and set forth each separate claim in a separate paragraph. Unrelated claims involving separate events must be set out in a separate complaint. (Attach additional sheets if necessary.)

ON MAY 14 2018 OFFICER BUTLER  
REACHED IN THE TRAIL AS I AM IN  
SEGREGATION AND GRABBED MY GENITALS  
AND SQUEEZED THEM. IT IS DURING  
SEXUAL HARASSMENT BY BUTLER. IT IS  
NOT THE ONLY INCIDENT THIS HAS  
CAUSED PHYSICAL AND EMOTIONAL  
PAIN AND DISTRESS.

VI. REQUESTED RELIEF

STATE BRIEFLY EXACTLY WHAT YOU WANT THE COURT TO DO FOR YOU. YOU NEED NOT MAKE ANY LEGAL ARGUMENTS, OR CITE ANY CASES OR STATUTES.

PUNITIVE AND COMPENSATORY DAMAGES  
OF \$100,000.

Lined area for text entry.

Date: JUNE 13 2018

Signature: Ronald McCary  
Prison ID #: 0668156